Entered - 08/09/00 - sb CL00L0473 - DIANNE C. MITCHELL

CLAIM OF: PROGRESSIVE INSURANCE COMPANIES AS SUBROGEE OF YUNETTA CALDWELL P. O. Box 43258
Richmond Heights, Ohio 44143

For damages alleged to have been sustained as a result of a vehicular accident on November 4, 1999 at Cascade Road and Delowe Drive.

BY PUBLIC SAFETY AND LEGAL ADMINISTRATION COMMITTEE:

BE IT RESOLVED by the Council of the City of Atlanta that the action of the Department of Law be approved in authorizing payment to **PROGRESSIVE INSURANCE COMPANIES AS SUBROGEE OF YUNETTA CALDWELL** the sum of \$1,000.00 in full settlement and satisfaction of all claims, past, present and future, of every kind and character for damages alleged to have been sustained as a result of a vehicular accident on November 4, 1999 at Cascade Road and Delowe Drive as is more particularly set forth in the within claim; said sum taken from and charged to account 2J01/529017/T31001, Settlement of Suits and Claims, Department of Law.

APPROVED: SUSAN PEASE LANGFORD CITY ATTORNEY

ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. <u>00L0473</u> Date: <u>October 9, 2000</u>
Claimant/Victim PROGRESSIVE INSURANCE COMPANY AS SUBROGEE OF YUNETTA CALDWELL
BY: (Atty)
BY: (Atty)
Subrogation: X Claim for Property damage \$ 5,101.66 Bodily Injury \$
Date of Notice: 11/12/99 Method: Written, proper X Improper
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X
Date of Occurrence 11/04/99 Place: Cascade Road and Delowe Drive
Date of Occurrence 11/04/99 Place: Cascade Road and Delowe Drive Department Public Works Division: Sewer Operations Employee involved Michael B. Williams Disciplinary Action: No Action Taken
Employee involved Michael B. Williams Disciplinary Action: No Action Taken
NATURE OF CLAIM: The driver of the City vehicle failed to yield right-of-way and collided with the claimant's vehicle causing damages in the above amount.
INVESTIGATION:
Statements: City employee Claimant Others Written Oral
Pictures Diagrams Reports: Police X Dept Report X Other
Traffic citations issued: City Driver X Claimant Driver
Citation disposition: City Driver Claimant Driver
BASIS OF RECOMMENDATION:
Function: Governmental X Ministerial
Function: Governmental X Ministerial Damages reasonable Damages reasonable
City not involved Offer rejected Compromise settlement X
Repair/replacement by Ins. Co. Repair/replacement by City Forces
City not involved Offer rejected Compromise settlement X Repair/replacement by Ins. Co Repair/replacement by City Forces Claimant Negligent City Negligent Joint Claim Abandoned
Respectfully submitted,
NVESTIGATOR - DIANNE C. MITCHELL
RECOMMENDATION:
Pay \$ 1,000.00 Adverse Account charged: 1A01 2J01 X 2H01
Pay \$_1,000.00 Adverse Account charged: 1A01 2J01 X 2H01 Claims Manager: Concur/date Concu
Committee Action:Council Action
Commune retion.
FORM 23-61

PROGRESSIVE

DATE: July 19, 2000	P.O. Box 43258 Richmond Heights, OH 44143
COMPANY: Council of City of Atlant ENTERED - 8-9-00 - SB	- Ph
00L0473 - DIANNE MITCHEI	(L) (5
ADJUSTER:	
FAX NO:	The second second
Our Insured: Yunetta Calowell Our Claim No.: 993790489	
Our Claim No.: 993790489	
Date of Loss: Nov 4, 99	
Your Insured: City of Atlanta	
Your Claim/Policy. No.: un/C	
Total Subro Balance: \$ 5, 101. 46	
(THIS FIGURE INCLUDES OUR INSURED'S \$ 500 00 D	EDUCTIBLE)
Please take this letter as formal notice of our subrogation rights with regard. We have completed our investigation into the facts of the above-captioned was the proximate cause of the accident.	loss and find that your insured
Please make your draft payable to "Progressive Insurance, as subrogee, in the amount	t stated above and mail it to the
attention of the undersigned at your earliest possible convenience.	
All supporting documentation is enclosed. I have diaried my file ahead fif your anticipated, prompt attention to this matter.	teen (15) days. Thank you for
PROGRESSIVE INSURANCE COMPANY	
Charmaine Simerton Subrogation Representative 1-877-818-0139, ext. 66300	
Enclosures	

sub22

GENERAL RELEASE AND INDEMNIFICATION

CLAIM NUMBER 00L0473	\$1,000.00
IN CONSIDERATION of the sum of ON	NE THOUSAND AND NO/100
	e CITY OF ATLANTA, the future receipt of which is hereby
·	s, executors, administrators, and assigns, release and forever
discharge said City, its officers and employees, incl	luding but not limited to Michael B. Williams, from any and
	s, damages, loss and expenses, of whatsoever kind or nature for
	red, and particularly for or on account of <u>a vehicular accident</u>
which occurred on or about the 4th c	day of November, 1999,
at or near <u>Cascade Road and Delowe Drive</u>	·
It is further understood and agreed that the	payment of the above named sum is not to be considered as an
	nts, servants or employees, of any liability whatsoever and the
*	mify and hold harmless the City of Atlanta, its officers, agents,
=	damages or costs which the said City of Atlanta, its officers,
agents, servants and employees, may be called upo	on to make as a result of the event hereinbefore referred to.
	for my signing this release and indemnification is the payment
	greement of any kind or nature has been made to or with me by
	ease, and that I fully understand the meaning and intent of this
instrument.	
WITNESS my hand and seal this/9+h	day of <u>September</u> , 2000.
	0 -
	Cla Vila de Caso
	PROGRESSIVE INSURANCE COMPANY AS
	SUBROGEE OF YUNETTA CALDWELL
The above release was read and explained t	to, and signed by the said
The above release was lead and explained t	to, and signed by the said
Lementer	in our presence on the date above written.
	The same
	Herrella alla
	By by MADE
	Witnesses
	Withesses